

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS  | ID NO.         | DATE                 |
|---------------------|-----------|----------------|----------------------|
| FEE DETERMINATION   | HL        |                | 7-26-01              |
| O.I.P.E. CLASSIFIER | ma        |                | 10/4/01              |
| FORMALITY REVIEW    | TD<br>A-T | 7C1125<br>1071 | 10/19/01<br>02/25/02 |

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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